



OHIO COUNTY OCCUPATIONAL TAX

For Office Use Only

EMPLOYER'S RETURN OF EMPLOYEE'S LICENSE FEE WITHHELD OR DUE

If "\$0" wages paid this period, enter "\$0" or "NONE" and return the form

1. Salaries, wages, commissions & other compensation paid for services performed in Ohio County..... \$
2. Tax Due at 1.00% of line 1.... (Line 1 x 1%)..... \$
3. Penalty 5.00% per mo. if past due **(Max 25% - Min \$25)**..\$
4. Interest 12.00% per annum (1% monthly or fraction thereof)....\$
5. Adjustment due to: rounding, credit, etc(+/-)..... \$
6. BALANCE DUE (total of lines 2 thru 5)..... \$

Should this account be made inactive? ____ NO ____ YES, Effective Date _____
REASON: _____

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed _____ Date _____

Title _____ Phone Number (270) - _____

PAID BY CHECK # _____

Name: _____
Contact: _____
Street Address: _____
City: _____ KY 00000

Acct No.
00000

PERIOD ENDING

Month	Day	Year
03	31	2009

DUE ON or BEFORE

Month	Day	Year
04	30	2009

Make checks payable and mail to:

**OHIO COUNTY
OCCUPATIONAL TAX ADMINISTRATOR
P.O. BOX 185**

HARTFORD KY 42347

Phone: (270) 298-4410 Fax: (270) 298-4409

lugenias@bellsouth.net

octaxclerk@bellsouth.net

Indicate name or address change above. FED ID / SS # _____

*** Return This Form To The Occupational Tax Office ***

Form OCC-3PT Rev. 7/6/09